



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
 UNITED STATES PATENT AND TRADEMARK OFFICE
 WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

SERIAL NUMBER 09/647,284	FILING DATE 09/27/2000 RULE	CLASS 340	GROUP ART UNIT 3635	ATTORNEY DOCKET NO. CH9-1999-002
-----------------------------	-----------------------------------	--------------	------------------------	--

APPLICANTS

Ceki Gulcu, Adliswil, SWITZERLAND;

** CONTINUING DATA *****

THIS APPLICATION IS A 371 OF PCT/IB00/00032 01/12/2000

04/16/04 JGS

** FOREIGN APPLICATIONS *****

EUROPEAN PATENT OFFICE (EPO) 99101806.0 01/28/1999

04/16/04 JGS

IF REQUIRED, FOREIGN FILING LICENSE

GRANTED ** 12/11/2000

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after <i>allowance</i>	SWITZERLAND	DRAWING	39	3
Verified and Acknowledged	<i>July 1st 2004</i> <i>04/16/04</i> <i>Initials</i>				
Examiner's Signature					

ADDRESS

Harry F Smith
 Ohlandt Greeley Ruggiero & Perle
 9th Floor
 One Landmark Square
 Stamford, CT 06901-2682

TITLE

Electronic access control system and method

FILING FEE RECEIVED 1524	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------	---	---

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 647284 RECEIPT DATE: 09 / 27 / 00
IA NUMBER: PCT/ IB00 / 00032 IA FILING DATE: 01 / 12 / 00
FAMILY NAME: GULCU DELAY WAIVED (Y/N): N
GIVEN NAME: CEKI DEMAND RECEIVED (Y/N): N
PRIORITY CLAIMED (Y/N): N PRIORITY DATE: 00 / 00 / 00
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: CH9 1999-002 COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 0000000 TELEPHONE 00000000000
FAX

NAME: HARRY F SMITH

STREET: ONE LANDMARK SQUARE 9TH FLOOR

CITY: STAMFORD

STATE/COUNTRY: CT ZIP: 069012682

EMAIL:

APPLICATION TITLES:
ELECTRONIC ACCESS CONTROL SYSTEM AND METHOD

TAB TO LAST POSITION, PUSH SEND